"DID WILEY EVER PRACTICE MEDICINE?"

To the JOURNAL office has come a circular which we here reproduce, together with the note which accompanied it from the member who sent it. This circular is some "hooray" for the W. C. T. U. of California, we take it.

WHISKY BANNED AS MEDICINE

Dr. Wiley Declares It Will Only Hasten Patient's Illness In "Flu" Cases

St. Louis, Jan. 30.—(By Universal Service).—Whisky and brandy have been eliminated as medicines, it was declared here today by Dr. Harvey W. Wiley, president of the United States Pharmacopeial convention, and former chief of the Bureau of Chemistry, Department of Agriculture. No mention of alcoholic liquors as medicines will be made in the next issue of the American Pharmacopeia, which is prepared every ten years, he said. This was determined upon several years before national prohibition became effective.

Whisky, instead of an effective remedy or preventive for influenza, is a positive poison in such cases, said Dr. Wiley, adding:

"In only one instance would I use whisky for an influenza case, and that would be where I wished to hasten the departure to Heaven of the patient."—S. F. Examiner.

U. C. T. U. OF CALIFORNIA City Hall Avenue San Francisco

"Did Wiley ever practice medicine? Think of the president of the U. S. Pharmacy Convention getting into class with the Chinese 'doc' who says flu patients are killed only by chicken broth and eggs."______

NURSES NEEDED.

"What are we going to do to get more nurses?" This question has been asked of the JOURNAL in written and various verbal forms so often, that we decided to place the question before all our readers instead of continuing to answer it privately and piecemeal.

That there is a shortage of trained nurses, and nurses in training, is generally felt. The medical profession is the first to feel this need and appreciate its seriousness, but it is a matter of concern to every hospital and to every citizen and family of every community.

Who will say that he or she or members of their family may not need a trained nurse today or tomorrow?

In untrained hands even the most skilful physician will not willingly and cannot safely leave his patients. We will not, therefore, attempt to forecast the menace to public health, and the heavy handicap it will impose upon the Doctor, when this present need of nurses grows greater, the number of nurses fewer, and the situation becomes more acute.

What's the cause? As the first step to finding out some of the reasons we have asked this question of many who are wrestling with the problem. From the answers given we condensed the following: I. Too high requirements for entrances and for graduation.

2. The great expense necessary for such training.

3. Training course too long.

All essential information and practical work could be fully mastered in two years. 4. Too much menial work that does not materially assist nurses' development in skill. 5. High cost of living, and the commercial field offers more attractive opportunities in the way of larger salaries, shorter hours and more pleasant environment. These are among the chief causes assigned.

At this time we shall not undertake to place the responsibility or suggest definite remedies except to say that a plan that does not seem to work well in practice might well be revised. It is unnecessary to speak of the great field of service that the trained nurse enters. The high conception of nursing as a profession is too well known to require comment. The real nurse treasures and the public appreciates the immeasurable difference between commercial work, in which the employer gets what he pays for, and the professional service, which can never be measured by money.

One of the gains of the war was the revival of the spirit of service and self-sacrifice. With regard to the nursing profession this was eulogized in dramatic prose and epic poem. The nurse was pictured as the greatest mother of the world—greater even than those who gave up their sons for humanity.

The war nurses are not letting their well-won laurels wither, but the high tide of service seems to be ebbing and worthy successors "with this regard their currents turn awry and lose the name of action."

The cause may lie in a combination of the reasons above assigned, and the remedy in changing conditions that may be changed without impairing the efficiency of the service. It must be conceded that when we have not enough nurses for normal needs, we are poorly prepared for emergencies.

This need which prevails in the larger cities is doubly emphasized in rural communities. Were it not for public health nursing, and the splendid and combined efforts of such organizations as the Red Cross, the Salvation Army, the various Welfare Boards of Churches and lodges the situation would be extremely alarming.

It has been suggested that there are many types of work in the private rooms and wards of a hospital that could be done as well or better by hospital maids, and the nurses' time and strength saved for more skilful work. There is much work that does not require long practice or training in order to do it satisfactorily. Hospital maids would be more readily available than nurses, and, supervised by nurses, the service to the sick would not be reduced but the cost would.

HANFORD STOPS SPITTERS.

Hanford's way of stopping spitting is to make it expensive. It will cost you \$300.00 per spit, if you're caught spitting on the sidewalk in Hanford. Handkerchiefs cost only two bits, so it is cheaper to use handkerchiefs than spit on the sidewalk in Hanford. Professional baseball has outlawed "spitters" after this season. But that isn't Hanford's way. When Hanford decided that spitting was a menace to its public welfare, it prohibited spitting, and the law is being rigidly enforced. Hats off to Hanford.